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27765 7590 12/24/2008

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Krystal Pan	(Depositor's name)
<i>Krystal Pan</i>	(Signature)
02/10/2009	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/709,789	05/28/2004	Sam Shiaw-Shiang Jiang	ASTP0039USA	3788

TITLE OF INVENTION: METHOD AND APPARATUS OF CONTROLLING A RESET PROCEDURE IN A WIRELESS COMMUNICATION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	Yes	\$755	\$300	\$1055	03/24/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
HOLLIDAY, JAIME MICHELE	2617	370-350000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1 <u>Winston Hsu</u>
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2 <u></u>
	3 <u></u>

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE **INNOVATIVE SONIC LIMITED** (B) RESIDENCE: (CITY and STATE OR COUNTRY) **P.O. Box 957, offshore incorporations centre, Road Town, Tortola, British Virgin Islands**

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):
<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check in the amount of the fee(s) is enclosed.
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /WINSTON HSU/ Date 02/10/2009
Typed or printed name Winston Hsu Registration No. 41,526

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